

R. H. CAREY, D.D.S., INC.

729 Everhart

Corpus Christi, Texas 78411

Telephone 992-7591

Gail C. Dorn
Attorney At Law
P.O. Box 23064
Corpus Christi, TX 78403

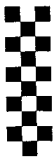
RE: Requested report on Eric Gonzales.

1. Graduated from Baylor Dental School in 1966. Following completion of internship in general dentistry, I served two years in the U.S. Navy as a general dentist. I have been a licensed dentist in the state of Texas since 1966. I successfully complete the continued education as required annually by the Texas State Board of Dental Examiners.
2. Mr. Eric Gonzales was seen in my office on one occasion only on August 5, 2005. At that time an initial oral exam and full mouth radiographs were preformed. Mr. Gonzales stated that he had not been to a dentist since childhood and his oral condition reflected his treatment history. Oral and radiographic examination revealed the following:
 - A. Generally good teeth with few existing restorations or cavities.
 - B. Class IV periodontal disease manifested by generalized bleeding, purulence, periodontal pocketing of 4-6mm throughout and resultant moderate alveolar bone loss involving his posterior teeth.
 - C. Tooth #9 (upper left central incisor) had sustained a Class II fracture (one half of the tooth missing with no nerve involvement)
 - D. Tooth #10 (upper left lateral incisor) had sustained a Class III fracture (3/4 of the tooth missing with nerve involvement)
 - E. Radiographs revealed a periapical abscess on the root tip of tooth #10
3. Mr. Gonzales did not offer to reveal the cause of the damage to his front teeth. Following my examination, it was obvious that Mr. Gonzales had sustained a traumatic blow of some sort, to his anterior teeth. Due to the presence and size of the radiolucency above tooth #10, the trauma to his teeth was sustained several months prior to the dated of examination. In my opinion, the condition of Mr. Gonzales' front teeth, when examined by our office on August 5, 2005 could very likely have been the result of the injury sustained from the incident as described on June 3, 2004.
4. Since it has been 5 months since the initial examination, it is impossible to recommend a treatment plan at the present time. However, the treatment plan immediately following the exam in August of 2005 was as follows:
 1. Periodontal treatment to entire mouth.
 2. Extract tooth #10 (upper left lateral incisors)
 3. Temporary fixed plastic bridge replacing tooth #10 during healing phase (approximately 2 months)
 4. Final, porcelain fused to metal, fixed bridge replacing the lost tooth.
 5. Cost of visit on August 5, 2005 was \$115. Estimated cost to treat the patient's current condition, if substantially unchanged from August 5, 2005, would be approximately \$4100.00

EXHIBIT

tabbles

41a



6. Yes
7. No convalescent time or permanent damage should result from this treatment. This treatment may not last Mr. Gonzales' life span. More than likely, a replacement bridge would be required much later in life.
8. The knowledge and experience gained from 39 years of practicing general dentistry gives me reason to believe the diagnosis and treatment plan recommended would be the best for the patient. The information and background regarding this case was derived only from the initial exam and dental history given to me by Mr. Gonzales at that time.
9. A full mouth radiographic exam and oral charting was performed on August 5, 2005
10. Previously stated
11. This report fee will be \$250.00. Deposition or court appearance fee \$1000.00 per day.
12. None

LAST NAME Gonzalez	FIRST NAME Eric	MIDDLE INITIAL	BIRTH DATE 3/1/71	AGE	HOME PHONE NO.	BUSINESS PHONE NO.
GUARDIAN	OCCUPATION	HLI CARRIED BY	INSURANCE COMPANY			

MEDICAL HISTORY

PHYSICIAN _____ PHONE NO. _____

TREATMENT FOR _____

MEDICINES _____

ALLERGIES _____

MEDICAL CONSIDERATIONS OR ALERTS _____

DENTAL HISTORY

LAST DENTAL VISIT _____

TREATMENT _____

APPREHENSION INDEX _____

SPECIFIC DISLIKE _____

ANEST _____ H₂O _____

FMX _____ SM _____

PERIO. HISTORY _____

BRUSHING HISTORY _____

CARIES INCIDENCE _____

ATTITUDE _____

REMARKS:

CLINICAL EXAM

1.) HEAD AND NECK: SKIN _____

2.) SOFT TISSUE: LIPS _____

CHEEK _____

VESTIBULE _____

TONGUE _____

3.) PERIODONTAL TISSUE: GENERAL _____

POCKETING _____

PUHULENCE _____

HEMORRHAGE _____

TEXTURE _____

COLOR **Purple**

RECESS ON _____

CALCULUS _____

OH INDEX **V.V. Poor**

4.) OCCLUSION: OVERJET _____

OVERBITE _____

ANT CROWDING _____

CUSPID GUIDANCE _____

DISCREPANCY BETWEEN BITE AND CENTRIC OCC _____

PREMATURING, BALANCING, INTERFERENCE, ETC. _____

EVIDENCE OF BRUXISM, ETC. _____

CUSPID GUIDANCE _____

MOBILITY _____

TMJ _____

MUSCULATURE _____

HABITS _____

OCC. EQUIL. NEEDED _____

OCC. BITE GUARD _____

5.) TEETH: GENERAL _____

AL MARKS

Class I**Class II****Class III occl.**

MISSING TEETH, REST., DISEASES, ABNORM., X-RAYS

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

TEETH CODE

ABRASION - AB

PERCUSSIVE

TENDERNESS - PT

PIM BUILD UP - PB

BUILD-UP - BU

POST BUILD-UP - PO

ROOT CANAL - RC

IMPACTED - I

PERICORONITIS - PC

NON-VITAL - NV

FISTULOUS

TRACT - FT

PUL POTOMY - P

NUVA - N

WATCH - W

FRACTURE - FX

SUPER

ERUPTED - SE

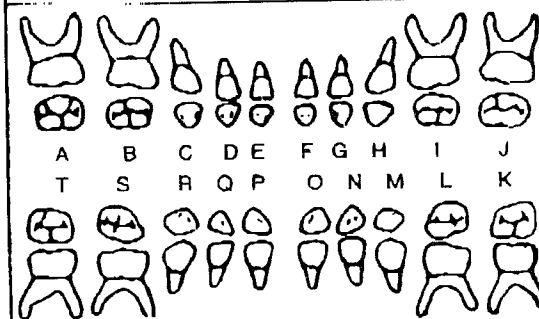
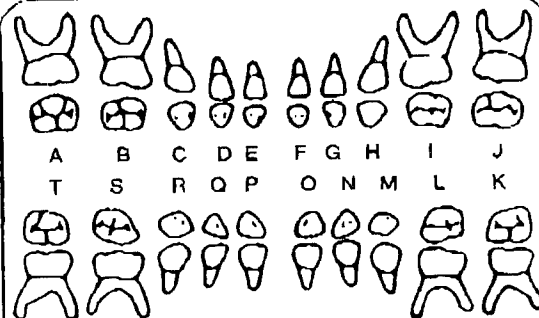
RESIN INLAY - RI

PORCELAIN

VENEER - PV

RESIN

VENEER - RV



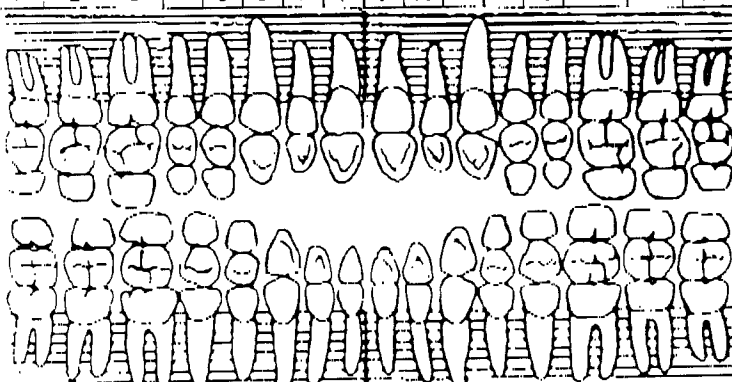
32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

01-17 06 06:45

T:

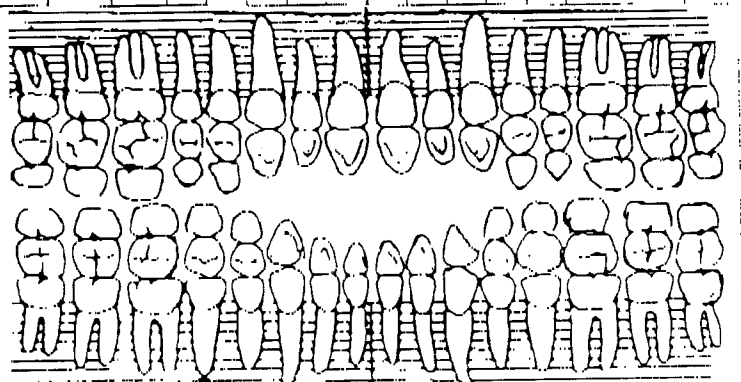
P:03

RESTORATIONS AND TREATMENTS COMPLETED

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
															
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

REMARKS:

SUBSEQUENT TREATMENT

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
															
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

REMARKS:

DATE TOOTH

SERVICE

CHARGE

8-05-95 EXAM, Fmx

DATE

TOOTH

SERVICE

CHARGE